

BEREAN CHRISTIAN COLLEGE AND SEMINARY
REQUEST FOR NAME CHANGE

If requesting a name change for any reason a copy of a court issued document, a Social Security Card, or Driver's License displaying the new name change must be submitted.

Previous Name

Last Name	First Name	MI
-----------	------------	----

I wish all information, certificates, and degrees below to reflect my current name.

Current Name

Last Name	First Name	MI
-----------	------------	----

Check One:

I am a () Current Student () Not a Current Student Last date enrolled_____

Official documentation attached (check one): ____ Court Order ____ Social Security Card ____

Marriage License _____ Divorce Decree _____ Date of Birth _____

Signature Date _____

Email to: The Office of the Registrar: Berean Christian College and Seminary
P. O. Box 428
Palmetto, Florida 34221